



Addressing High-Risk Substance Use through STI Clinics: Strengthening Connections to Treatment and Behavioral Health Services

Request for Proposals (RFP) Q&A

This document includes all questions that NACCHO has received regarding the [RFP](#). Note that some of these questions were also addressed on the [informational webinar](#). Where responses differ between the webinar and this document, answers in this document should be considered final. Questions and answers will be added periodically through the application period, which ends June 25, 2019, by 11:59 PT.

This document was most recently updated on June 7, 2019.

1. Q: Can we apply with a SUD treatment/BH services partner within the same organization?

A: Yes. The letter of commitment should be signed by the heads of the respective bureaus/departments.

2. Q: Will we need IRB approval for data collection?

A: We do not anticipate that IRB approval will be needed for this project.

3. Q: We currently have a grant that supports us in addressing substance use through the STI clinic. Would we still be competitive for this opportunity?

A: Yes. Your proposal should illustrate what additional funding would allow you to accomplish.

4. Q: Are there limitations on indirect costs or costs in general, or a maximum indirect rate?

A: We do not have any limitations on the indirect rate. However, we will need either your federally approved indirect rate or another explanation of how your indirect rate is derived.

5. Q: As a small tribal community, we have an ambulatory clinic that provides STI services. Would this qualify?

A: No. This funding opportunity is specific to STI clinics. If you have a specific argument for how your ambulatory care clinic could be an appropriate setting for this project, please get in touch with us to discuss.

6. Q: Will patients be required to sign a waiver or liability form? If so, will NACCHO provide one?

A: We do not anticipate that patients will need to sign a waiver or liability form for the purpose of receiving services specific to this project. Therefore, NACCHO will not provide one.

7. Q: What are approved budget expenses and what expenses are disallowed?

A: This will be a cost-reimbursable grant. All allowable expenses are outlined in [45 CFR 75](#), which is also linked in the introductory page of the RFP. Budget expenses should align with your

proposed intervention. Potential expenses might include staff salary, transportation vouchers, and staff training.

8. Q: For the data point “duration of intervention,” how specific does this need to be?

A: This will depend on each site, as some sites currently capture this information, or can easily do so, in their electronic health records, and others will have to do so manually. NACCHO recognizes that it might be impossible to add fields or processes to capture this information in electronic health records, and therefore this data point might be more of an estimate. This data point might be an example of a challenge that you might face and resolve, as required by the application. Please describe how this data point would be captured or approximated in your application.

9. Q: Can we have more than one partner with letters of commitment?

A: Yes.

10. Q: To clarify, we only need to have a data collection plan, but do not need to conduct data analysis?

A: This statement is correct. Per the RFP, CDC will analyze project data by site and across sites and will share and review data summaries with each of the project sites.

11. Q: Can partners receive funding as a subaward to complete work as part of this pilot initiative?

A: Yes, as long as the partners’ funding supports the completion of required project activities. Include descriptions of the roles and responsibilities of proposed partners in your proposal.

12. Q: Can we use grant funds for electronic health records costs?

A: Yes.

13. Q: Can we use grant funds to supplant staff salary?

A: Yes.

14. Q: Does NACCHO have a cap on indirect rates?

A: No.